

UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEW JERSEY

Caption in Compliance with D.N.J. LBR 9004-1(b)

In Re:

MOSHE GOLD

CLERK
U.S. BANKRUPTCY COURT
EASTERN DISTRICT OF
NEW YORK

2024 NOV 19 A 9:51

RECEIVED

Case No.: 24-43647-NHL

Chapter: 11

Adv. No.: _____

Hearing Date: NOV 19, 2024 at 10:30

Judge: Nancy Hershey Lord

CERTIFICATION OF SERVICE

1. I, DAVID HALPERN :

☐ represent _____ in this matter.

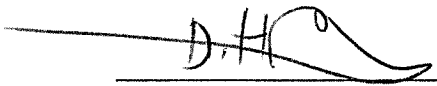
☒ am the secretary/paralegal for YOEL ABRAHAM, who represents
PRO SE in this matter.

☐ am the _____ in this case and am representing myself.

2. On SEPTEMBER 9, 2024, I sent a copy of the following pleadings and/or documents
to the parties listed in the chart below.
summons and involuntary bankruptcy petition

3. I certify under penalty of perjury that the above documents were sent using the mode of service
indicated.

Date: September 9, 2024


Signature

Name and Address of Party Served	Relationship of Party to the Case	Mode of Service
MOSHE GOLD 26 Heyward St. Brooklyn NY 11249		<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
MOSHE GOLD 63 Flushing Ave Brooklyn, NY 11205		<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
		<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
		<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
		<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)

Name and Address of Party Served	Relationship of Party to the Case	Mode of Service
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		<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)